SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

BAYFIELD COUNTY, WISCONSIN



Permit #:	19-0143
Date:	10-3-19
Amount Paid:	\$1.8006-3-1
Refund:	

NSTRUCTIONS: No per Checks are made payab DO NOT START CONSTR	le to: Bayf	ield Coun	ty Zoning De	partment.	Doi ji	ield Co. Zoning	Dept.)		FILL OUT I	N INK	(NO PE	NCIL)	
					NITARY		CONDITI	ONAL US	SE 🗆 SI	PECIAL U	SE [B.O.A.	□ от	HER
TYPE OF PERMIT RE Owner's Name:			□ LAND		Mailing	g Address:		City/Stat	e/Zip:			1	alanhana	
Michael E Address of Property: 48245 S.	Bai	Hen	trug	tee	132	S Becine tate/Zip:	st.	Raci	ne u	153	40	3	Cell Phone	
Address of Property:	11	^	_										15. 790	- 3225
48245 5	lake	Dwe	en Or			le WI 54	Plumber:						Plumber Pl	
						634-3918	riumber.					7	15-63	4-39/8
Danny + Run Authorized Agent: (Pe	erson Signin	g Applicati	ion on behalf o	of Owner(s))		Phone:	Agent Maili	ng Addres	ss (include C	City/State/Z	Zip):			ıthorization
Authorized Agent. (Fe	213011 DIBITITI	P / Ippiloati											Attached □ Yes □	No
	-				Tax ID)#					Record	ded Docun	nent: (Show	ving Ownership)
PROJECT LOCATION	Legal De	escriptio	n: (Use Tax	Statement)		1395	2				2007	1-513	950	970-669
1/4,	1//		Gov't Lot	Lot(s)	CSM	Vol & Page CSI	M Doc#	Lot(s) N	o. Block	k(s) No.	Subdiv	vision:		
1/4,	1/-	*	8	dig		970-66 9					Lot Siz	70	Acreag	ρ
Section 22	Towns	thin 2/	4 N. Ra	nge 7	w	Town of: Drum	2222	1			LUCSIA			,952
Section	_ , 1000113	,p				Vrum	MON	0		1			0.0	
	V Is Pr	operty/L	and within	300 feet of R	iver, Stre	am (incl. Intermittent)	Distanc	e Structu	re is from			Is Prop		Are Wetlands
V	Creek	or Landv	vard side of	Floodplain?	If y	escontinue —			2		eet	Floodplai		Present? Yes
Shoreland -	✓ Is Pr	operty/l	and within	1000 feet of	Lake, Por	nd or Flowage		ce Structu	re is from		eet	XV IN		No
	/~				If y	escontinue -		/ >		'	eet	-0.		/
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Value at Time							bedro				at Typ			Type of Water
of Completion * include		Project	t	# of Sto	ries	Foundation	beard					y Systen	n	on
donated time &							struc			Is on t	he pro	operty?		property
material	1=C11	Consta		☐ 1-Story		Basement	□ 1	[☐ Munici	pal/City				☐ City
	/\	Constr	Iteration	☐ 1-Story	+ Loft	Foundation		7			Speci	fy Type: _		Well
\$ 0000000	***************************************	version		2-Story			X 3	/	☐ Sanita	ry (Exists) Spec	ify Type:	11	
(000,000,000			isting bldg)				-		☐ Privy (Pit) or	☐ Vau	on)		
I.		a Busin				Use	☐ No	one	☐ Portab	ole (w/ser	vice co	ntract)		
		erty				☐ Year Round	d			ost Toilet	:	**		
									None					
	116	Se to stor	lind fa	r is relevant t	o it)	Length:			Width:			He	eight:	
Existing Structur Proposed Consti		mit bein	ig applied ic	il 15 leievant t	0 10	Length:	多 3	8	Width:	蓍	30) н	eight:	20
Proposed const	actio								1 1 1 1 1 1			5-1-11		Square
Proposed U	se	1				Proposed Struc	ture				ı	Dimensio	ns	Footage
Troposcu o	50		D in its	Characterists /	first stru	ıcture on propert	-v)				(]	⇒ X	36)	2570
		□ X				g shack, etc.)	-	Kg.				0 X 2	81	1140
		X	Resident	with Loft		5 strack, etc.,			6.		(/	# x 2		392
Residentia	Use	T		with a Po							("	8 X 2	41	192
/ Residential				with (2nd) Porch						(Х)	
		支		with a D	·						(Х)	
		1		with (2nd) Deck						(X)	
☐ Commercia	al Use			with Att				1			(X)	
			Bunkho	use w/ (□ sar	nitary, <u>or</u>	r □ sleeping quart	ers, <u>or</u> 🗌 c	ooking &	food prep	facilities)	(X)	4
			Mobile	Home (manu	factured	date)					(X)	
			Addition	n/Alteration	(specify	y)					(X)	
☐ Municipal	Use		Accesso	ry Building	(specify	y)					(Х)	
			Accesso	ry Building /	Addition	/Alteration (spe	cify)	19.7	# "		(Х)	
				3 8	7	4								
			Special	Use: (explain)) ·	21 1					(Х)	
											(Х)	
											(Х)	
I (we) declare that th (are) responsible for result of Bayfield Co property at any reass	the detail an unty relying	d accuracy on this info	any accompany of all information frmation I (we)	ving information) h on I (we) am (are) p am (are) providing	nas been exa	TARTING CONSTRUCTI amined by me (us) and to and that it will be relied upo this application. I (we) cor	the best of my	(our) knowle	eage and belle	ther to issue	a nermit	complete. I . I (we) furth nances to ha	(we) acknowl er accept liab ve access to t	edge that I (we) am ility which may be a he above described
					1						г	Date		
Owner(s):	ultiple Ow	nore lists	d on the Do	ed All Owners	must sign	or letter(s) of author	rization mus	st accomp	any this app	lication)				
		/ /		/)								note G	-0-	1-19
Authorized Age	ent:	Bu	TA	Dus	ns	tter of authorization	must accor	mnany this	application	1)	I	Jate	0	
	(If	you are s	igning on be	half of the owi	ner(s) a le	itter of authorization	must accor	inputity trits	application	4			Attach	

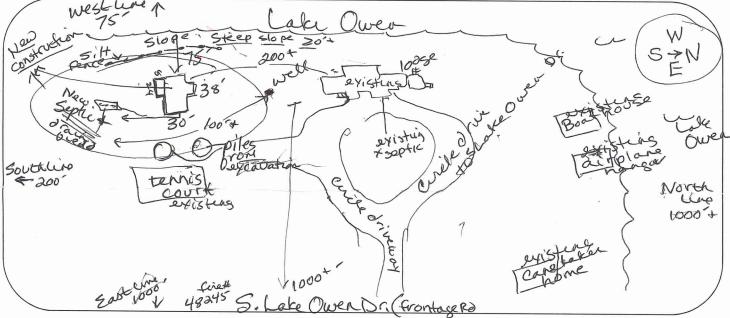
Address to send permit 13491 W Peterson Rd. Hayward, WI

WI 54843

Attach
Copy of Tax Statement

If you recently purchased the property send your Recorded Dee

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL (1)Show Location of: Proposed Construction Show / Indicate: (2)North (N) on Plot Plan (3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5)Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6)Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (7)Show any (*): (*) Wetlands; or (*) Slopes over 20% -11 akı



Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurem	ent	Description	Measur	ement
Setback from the Centerline of Platted Road		Feet	Setback from the Lake (ordinary high-water mark)	75	
Setback from the Established Right-of-Way	1300	Feet	Setback from the River, Stream, Creek	-	Feet Feet
	1,7		Setback from the Bank or Bluff	_	Feet
Setback from the North Lot Line	1000	Feet			
Setback from the South Lot Line	200	Feet	Setback from Wetland	-	Feet
Setback from the West Lot Line	75	Feet	20% Slope Area on the property	Yes	□ No
Setback from the East Lot Line	1000	Feet	Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	NEW	Feet	Setback to Well	100	Feet
Setback to Drain Field	NEW	Feet	SCHOOL TO VICE	100	reet
Setback to Privy (Portable, Composting)	_	Feet			

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: /	9-145	# of bedrooms: 3	Sanitary Date: 5/	2/10
Permit Denied (Date):	Reason for Denial:				~// 7
Permit #: 19-0143	Permit Date: 6-3	3-19			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Recor □ Yes (Fused/Contigue) □ Yes		Mitigation Required Mitigation Attached	□ Yes □ No □ Yes □ No	Affidavit Required	
Granted by Variance (B.O.A.) □ Yes □ No Case #:		Previously Granted by ☐ Yes ☐ No	y Variance (B.O.A.) Case	e #:	
Was Parcel Legally Created Was Proposed Building Site Delineated Yes No		Were Property Line	es Represented by Owner Was Property Surveyed	Yes	□ No
Inspection Record:				Zoning District (Lakes Classification (R-1)
Date of Inspection:	Inspected by:			Date of Re-Inspection:	
0.0	Condition: Construction practices shall be imple erosion or sedimenta properties or wetlands. shall be obtained.	emented to prevent a ation onto neighbor Necessary UDC per	any ing	s as per 3/21,	119 hearing
Mul	- 7/	-110- 04		Date of Approval:	1/3/19
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🔲	Hold For Fees:	DOWNER S	gnature

May Also Be Required

SANITARY - 19-14S
SIGN SPECIAL CONDITIONAL - X (ZC Mtg: 3/21/2019)
BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-	0143		3/6	Issue	d To: Mi	chael	Batten / Ru	uth Du	ıms,	Agent				
Location:	Ģ.	1/4	of	-	1/4	Section	22	Township	44	N.	Range	7	W.	Town of	Drummond
Gov't Lot	8		ŀ	_ot	975	Blo	ck	Sul	bdivisio	n				CSM#	

Approval of EIA and to allow the (2) existing residences to remain on the property and a new 2-story residence w/deck (70 x 36) be built. The (2) remaining historical cabins shall be torn down. Property is allowed to have (3) residences total as a MUD): to include: [2 - Story, Residence (30' x 38') = 1,140 sq. ft.; Loft (14' x 28') = 392 sq. ft.; Porch (8' x 24') = 192 sq. ft.] Total Overall = 1,332 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained. The new structure have its own septic system. The septic servicing the main residence be evaluated and upgraded as necessary prior to issuance of the permit. The open space requirement minimum of 90,000 sq. ft. be maintained as long as there are three units on the property. The two cabins identified for removal be removed within one year.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.

Changes in plans or specifications shall not be made without obtaining approval This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 3, 2019

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Permit #:	19-0146
Date:	6-4-19
Amount Paid:	#360 5-31-19
380	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO	NOT START	CONSTRUCT	ON UNTIL	ALL PERMIT	S HAVE BEEN	ISSUED TO APP

FILL OUT IN INK (NO PENCIL

DO NOT START CONS		· OIIII	ALL I LIGHTIS II	AVE BEEN 1330EL	TOAFF	LICANI.			FILL OUT	IIV IIVK	(NO PE	IVCIL)		
TYPE OF PERMIT R	EQUEST	ED—▶	LAND	USE SA	NITAR		CONDITIONA		SPECIAL	USE [□ B.O.A	10.00	THER	
Owner's Name: MICHAE	EL	G,	TEF	5	Maili 68	ng Address: 3A Rいり H CL	SEK RD SP	/State/Zip: ルルG	GRE9	10 L	ر ا ت د	elephon っつを -	e: 588-2952	
Address of Property: 47183 BA		R	0		City/	State/Zip:) Rum n o ル O ,					(Cell Phon	e: 177-5573	
Contractor:	, ,						lµmber:	2		Plumber Phone:			Phone:	
Scott Byro	1 Le	nst			715-	t Phone: A	Indry K	asmisen y	Sons)	7	715-798-3355		
Authorized Agent: (P	2	1	cation on behalf	f of Owner(s))	Agen	t Phone: A	gent Mailing Ac	ddress (include	City/State/	Zip):	1	Written A	Authorization	
Scott B	400	1			112.	492-4184 19	To Pione	eer Kd la	ble w	1544	321	Yes	□ No	
PROJECT LOCATION	<u>Legal</u>	Descrip	tion: (Use Ta	ax Statement)	<u>Tax II</u>	14097				Record	ed Docum	ent: (Sho	wing Ownership)	
1/4,	1	./4	Gov't Lot	Lot(s)	CSM 1020			s) No. Bloo	ck(s) No.	Subdivi	ision:			
Section 30	, Towi	nship _	44 N, R	ange	W	Town of: DRUMM	000	•		Lot Size	2	Acreage 16	570	
	Creek	(4)		300 feet of Riv f Floodplain?	1111 1111	eam (incl. Intermittent)	Distance Stru	ucture is from			Is Prope		Are Wetlands Present?	
	W/s P	roperty	/Land withir	1000 feet of L		nd or Flowage	Distance Stru	cture is from	Shoreline		□ Ye	s	☐ Yes	
☐ Non-Shoreland), h,				4				
Value -t T			Physical Artesta											
Value at Time of Completion							# of		Wh	at Type	of		Type of	
* include		Proje	ct	# of Stori	es	Foundation	bedrooms	in the second	Sewer/S				Water	
donated time & material							structure		Is on t	he prop	erty?		property	
material	□ Nev	v Const	ruction	✓ 1-Story		⊠ Basement	X 1	☐ Munici	pal/City				☐ City	
,	ÄAdd	lition/	Alteration	☐ 1-Story +	Loft	☐ Foundation	□ 2		Sanitary	Specify	Type:		× Well	
120,000	☐ Con	versior	1	☐ 2-Story		□ □ 3								
			xisting bldg)					☐ Privy (F	Pit) or [☐ Vaulted (min 200 gallon)				
		a Busi perty	ness on			Use	□ None □ Portable (w/service contract) Indification 4 □ Compost Toilet							
360		Jerty				☐ Year Round》	c 10121 g	□ Compo	st Tollet				_	
		SA 10 . 50												
Proposed Constru		mit beir	ng applied fo	r is relevant to i	t)	Length: 3 0	,	Width:	77'		Heig		11"	
Troposca constitu	action.					Length. 50		wiatii.	00		Heig	nt: /	6	
Proposed Use	e	1				Proposed Structur	·e			Din	nensions		Square Footage	
	}					cture on property)				(Х)		
	-		Residence	e (i.e. cabin, h	unting	snack, etc.)	-			1	X)		
Residential I	Use			with a Porc	h					1	X	1		
				with (2 nd) P					5.7	(Х)		
. 6				with a Decl				Ą		(Х)		
	II.			with (2 nd) [*	1/2 2			(Х)		
☐ -Commercial	use			with Attack			Y Y				Х)	W	
~						sleeping quarters,	or □ cooking &	& food prep fa	cilities)	(Х)		
			-	ome (manufact			/ / / /			12	X)	015	
☐ Municipal U	se	×				Bedroom 1	BOTH A	00-00		130	x 26	()	660	
-				Building (s		Alteration (specify)				1	X)		
No 6 1 6 10		`\	Accessory	bunding Add	ii.ion/	Aireration (specify)				1	^	1		
New burage			Special He	se: (eynlain)						1	X	1	į.	
			Condition	al Use: (evolai	n)				-	1	X	1		
										1	X	1		
										1		1		
(are) responsible for the	detail and : y relying on	accuracy o this infor	ny accompanying f all information I mation I (we) am	g information) has be (we) am (are) provid	en examir	RTING CONSTRUCTION Water by me (us) and to the beneat it will be relied upon by Eapplication. I (we) consent to	st of my (our) knowl	ledge and belief it i	s true, correc	t and comp	further acc	ant liability	which may be a	
						letter(s) of authorization				Date				

Authorized Agent: Swith Rycological (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit 19720 Pioned Rd Cable W, 54821

Attach

Date 4 -25-19

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE raw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show: Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond Show any (*): (*) Wetlands; or (*) Slopes over 20% Hammil Lot Lind

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measuren	nent		Description	Measur	rement
						,
Setback from the Centerline of Platted Road	1000	Feet		Setback from the Lake (ordinary high-water mark)	75	Feet
Setback from the Established Right-of-Way	1000	Feet		Setback from the River, Stream, Creek		Feet
	,			Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	500	Feet				
Setback from the South Lot Line	100'	Feet		Setback from Wetland	75'	Feet
Setback from the West Lot Line	75'	Feet		20% Slope Area on the property	XYes	□ No
Setback from the East Lot Line	1000+	Feet		Elevation of Floodplain		Feet
Setback to Septic Tank or Holding Tank	30	Feet		Setback to Well	5	Feet
Setback to Drain Field	40	Feet				
Setback to Privy (Portable, Composting)	,	Feet	TT			
Prior to the placement or construction of a structure within ten (10) feet	of the minimum requi	ired cethock t	he ho	undary line from which the cethack must be measured must be visible from a	no provincely supre	and answer to th

faver Rd

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

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(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	67 378	# of bedrooms:	Sanitary Date:	a /an
Permit Denied (Date):	Reason for Denial:				
Permit #: 19-0146	Permit Date: 6-4	1-19			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recondance Yes (Fused/Contigue Yes Yes	ous Lot(s)) 💆 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes No	Affidavit Required ☐ Yes Affidavit Attached ☐ Yes	□ No ☑ No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted by ☐ Yes ☑ No	y Variance (B.O.A.) Case	e #:	
Was Proposed Building Site Delineated Yes No		Were Property Line	es Represented by Owner Was Property Surveyed	□ YesYes	
Inspection Record: Staked - Talled to	ounens - K	tain thing 3 Bds		Zoning District (A Lakes Classification (2	
Date of Inspection: 5/30//9	Inspected by:			Date of Re-Inspection:	
Condition(s): Town, Committee or Board Conditions Atta	Condition:	onstruction site best ill be implemented to sedimentation onto wetlands. Necessary	management prevent any neighboring	Date of Approval:	131/19
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗌	Hold For Fees: 🗌	_ 0	

City, Village, State or Federal May Also Be Required

LAND USE - X
SANITARY - 367378 (9/13/2000)
SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-	0146	5		Issued	d To: Mi	chael	& Barbara	Teff	/ Sco	tt Byrd,	Age	nt		
Location:	2	1/4	of	i. L	1/4	Section	30	Township	4	N.	Range	7	W.	Town of	Drummond
Gov't Lot		1		_ot	1	Blo	ck	Su	bdivisi	on				CSM# 1	1020

For: Residential Addition / Alteration: [1- Story; Bedroom & Bathroom (30' x 22') = 660 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Construction site best management practices shall be implemented to prevent any erosion or sedimentation onto neighboring properties or wetlands. Necessary UDC permit shall be obtained.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Tracy Pooler

Authorized Issuing Official

June 4, 2019

Date

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept



Permit #: Date: Amount Paid: Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CONS	TRUCTION	UNTIL	ALL PERMITS H	AVE BEEN ISSUED	TO APPL	ICANT.			FILL OU	T IN INK	(NO PEN	ICIL)			
TYPE OF PERMIT R	REQUEST	ED-	₩ LANI	D USE SA	NITARY	□ PRIVY □	CONDITIONA	AL USE	☐ SPECIAL	USE [B.O.A.	□ O1	THER		
Owner's Name:					Mailin	g Address:	City	/State/7ii):			lephone			
micho	ae l	6	Tot	F	68	32 Rush Cr	RU 5	Pring	525 89	WI	60	28-58	8-2952		
Address of Property:	. 0			.:	City/S	tate/Zip:						ell Phone	:		
Mich of Address of Property: 47185	Ba	UPT	Kol		0	ro mmond actor Phone: 192-4184 Phone: 492-4184	Wi				60	08-5	77-5573		
Scoff By				14	Contra	actor Phone: P	lumber:	1			Pli	umber Pl	hone:		
Authorized Agent: (F	Parson Sign	205 T	cation on bobal	f of Owner(s)	7/5-4	192-4184	gont Mailing As	Jaluana /:	Juda City/Ctat	17: 1 10	24 - 114				
Scott 1	-		cation on benai	r or Owner(s))	Agent	402 4194 1	A 2 2	aress (inc	clude City/State	e/Zip): 59	8 W At	ritten Au tached	ithorization		
	5910				Tax ID	#	1100 1	over	red lab	le wi	A	Yes 🗆			
PROJECT LOCATION	Legal I	Descrip	tion: (Use T	ax Statement)	IdxiD	<u>#</u>				20/	8 R		ring Ownership)		
1/4,	1,	/4	Gov't Lot		CSM			s) No.	Block(s) No.	Subdivis	sion:				
Section 30	. Town	nship	44 N.R.	ange 07 V	W	5326 10 Town of:	,	1		Lot Size		Acreage			
				unge		Drumm	ond					16.	570		
	Creek			n 300 feet of Riv of Floodplain?		am (incl. Intermittent)	Distance Stru	icture is	from Shorelin	r	Is Propert		Are Wetlands Present?		
✓ Shoreland →	√ Is P	roperty	/Land withir	n 1000 feet of La			-	icture is	from Shorelin		☐ Yes		∂ Yes		
					If ye	scontinue	-95			feet	□ No		□ No		
☐ Non-Shoreland															
Value at Time			e i	Dell'artes		ALT COMPANY	u . r		n 75 / 14				A PERMIT		
of Completion							# of bedrooms			nat Type			Type of		
* include donated time &		Proje	ct	# of Stori	es	Foundation	in			Sanitary			Water		
material							structure		is on t	the prop	ertyr		property		
30,000	-		ruction	1-Story		Basement	□ 1	ınicipal/City	/ City						
\$			Alteration	☐ 1-Story +							Specify Type: Well				
4	☐ Con						□ 3			Exists) Specify Type: CON					
5											☐ Vaulted (min 200 gallon)				
			xisting bldg)			Use	X None					00 gallon)		
	☐ Run		ness on			Use Year Round	None	□ Ро	rtable (w/ser	vice contr		00 gallon)		
85	☐ Run	a Busi				Use Year Round	· - ·	□ Ро	rtable (w/ser mpost Toilet	vice contr		00 gallon)		
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Existing Structure Proposed Constru	Run Prop	a Busi perty	ness on		t)	Year Round	· - ·	☐ Po	rtable (w/ser mpost Toilet ne	vice contr	Heigh	nt:	15		
Existing Structure	Run Prop	a Busi perty	ness on		t)	Year Round Length:	· - ·	☐ Po☐ Co☐ No	rtable (w/ser mpost Toilet ne	vice contr	act)	nt:	15		
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Proposed Us	Run Prop e: (if per uction:	a Busi	ness on ng applied fo Principal	Structure (firse (i.e. cabin, huwith Loft with a Porc with (2 nd) P	st struct unting s ch corch	Length: Length: Proposed Structure ure on property) hack, etc.)	None	☐ Po☐ Co☐ No	rtable (w/ser mpost Toilet ne	vice contr	Heigh Heigh nensions X X X X X	nt:	15 Square		
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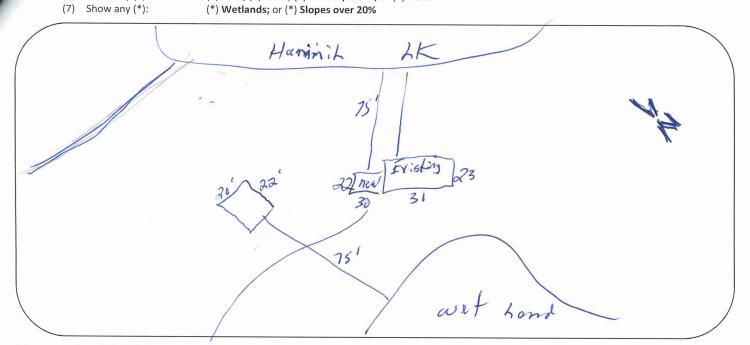
(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

Address to send permit _

Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE <u>Draw</u> or <u>Sketch</u> your <u>Property</u> (regardless of what you are applying for) Fill Out in Ink – **NO PENCIL** Show Location of: **Proposed Construction** Show / Indicate: North (N) on Plot Plan (2) (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6)



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement			Description	Measurement			
	,							
Setback from the Centerline of Platted Road	1000 T	Feet		Setback from the Lake (ordinary high-water mark)	95'	Feet		
Setback from the Established Right-of-Way	1000 T	Feet		Setback from the River, Stream, Creek		Feet		
				Setback from the Bank or Bluff	30'	Feet		
Setback from the North Lot Line	500'	Feet						
Setback from the South Lot Line	100'	Feet		Setback from Wetland	75	Feet		
Setback from the West Lot Line	75'	Feet		20% Slope Area on the property	Yes	□ No		
Setback from the East Lot Line	1000+	Feet		Elevation of Floodplain	- V	Feet		
					-			
Setback to Septic Tank or Holding Tank	100+	Feet		Setback to Well	401	Feet		
Setback to Drain Field	100+	Feet						
Setback to Privy (Portable, Composting)	nIA	Feet						
Prior to the placement or construction of a structure within ten (10) feet	of the minimum require	d setback, t	he bo	bundary line from which the setback must be measured must be visible from on	a praviously survey	ed corner to the		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number: 3	67378	# of bedrooms: 3	Sanitary Date: 9	/13/19					
Permit Denied (Date):	Reason for Denial:	Reason for Denial:								
Permit#: 19-0147	Permit Date: 6-4	-19								
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes □ Yes □ Yes □ Yes □ Yes □ Yes	ous Lot(s)) 🗹 No	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No		Yes No					
Granted by Variance (B.O.A.) ☐ Yes ✓ No Case #:		Previously Granted by Yes No	y Variance (B.O.A.)	e #:						
		Were Property Lines Represented by Owner Was Property Surveyed Yes Yes								
Inspection Record:		1		Zoning District Lakes Classification	(R-2)					
Date of Inspection: 5/30/19	Inspected by:	Date of Re-Inspection:								
Condition(s): Town, Committee or Board Conditions Attached? Yes No - (If No they need to be attached.) Condition: May not be used for human habitation unless all applicable zoning/sanitary & UDC codes are fully met. Date of Approval: Date of Approval:										
Hold For Sanitary: Hold For TBA:	Hold For Affid	lavit: 🗌	Hold For Fees: ☐	_ 0	6/9///9					

City, Village, State or Federal May Also Be Required

or if any prohibitory conditions are violated.

LAND USE - X
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	19-0147				Issue	d To: M i	ichael	& Barbara	Teff	/ Scot	tt Byrd,	Age	nt		
Location:	-	1/4	of		1/4	Section	30	Township	4	N.	Range	7	W.	Town of	Drummond
Gov't Lot		4.1	Lo	t	1	Blo	ock	Subdivision				CSM# 1020			

For: Residential Accessory Structure: [1- Story; Garage (20' x 22') = 440 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): May not be used for human habitation unless all applicable zoning / sanitary & UDC codes are fully met.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

Date